

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing
OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number ATM-2243

First Named Inventor KANCSAR

COMPLETE IF KNOWN

Application Number /

Filing Date November 21, 2001

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CHILD-RESISTANT PACKAGING FOR TABLETS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
99810482.2 PCT/EP00/04333	Europe PCT	6/2/1999 5/13/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label OF ☒ Correspondence address below

Name Fisher Christen & Sabol

Address 1725 K Street, N.W., Suite 1401

City Washington

State D.C.

ZIP 20006

Country United States

Telephone 202 659-2000

Fax 659-2015

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) Peter

Family Name
or Surname KANCSAR

Inventor's
Signature

Date

Zurich
Residence: City

State

Switzerland
Country

Swiss
Citizenship

Mailing Address Schaffhauserstr. 81

Zurich
City

State

CH-8057
ZIP

Switzerland
Country

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) Laurenz

Family Name
or Surname Zellweger

Inventor's
Signature

Date

Zurich
Residence: City

State

Switzerland
Country

Swiss
Citizenship

Mailing Address Manessestr. 92

City Zurich

State

CH-8045
ZIP

Country Switzerland

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s); PTO/SB-02A attached hereto.

<h2 style="margin: 0;">DECLARATION</h2>	ADDITIONAL INVENTOR(S) Supplemental Sheet: Page <u>11</u> of <u>11</u>
---	---

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Michael				Krohn			
Inventor's Signature						Date	
Residence: City Zurich		State		Switzerland Country		German Citizenship	
Mailing Address Limmattalstr. 38							
Mailing Address							
City Zurich		State		CH-8049 ZIP		Country Switzerland	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Claudia				Schmauder			
Inventor's Signature						Date	
Residence: City Zurich		State		Switzerland Country		Swiss Citizenship	
Mailing Address Hardturmstr. 66							
Mailing Address							
City Zurich		State		CH-8005 ZIP		Country Switzerland	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Susanne				Marti			
Inventor's Signature						Date	
Residence: City Zurich		State		Switzerland Country		Swiss Citizenship	
Mailing Address Limmattalstr. 38							
Mailing Address							
City Zurich		State		CH-8049 ZIP		Country Switzerland	